

Leading
the way to

**PIONEER
PRACTICES**

**A Brochure for
Facility Staff**



ILLINOIS
DEPOSITORY

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ILLINOIS
**Department
on Aging**

George H. Ryan
Governor

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Director

NURSING HOMES

The Status Quo . . .

Nursing homes were developed according to the medical model in the 1960s. Built like hospitals with long hallways, central nurses' stations, task-oriented staff routines, and sterile environments, nursing homes were intended to treat the diseases of the frail and elderly.

However, residents of nursing homes need far more than basic medical care. Residents need a place that meets social, religious, emotional, occupational, recreational, and cultural needs. **Long-term care facility residents need a HOME where they can LIVE.**

The Pioneers . . .

Every resident, family member, facility staff and administrator needs to know that **nursing homes can be different!**

Nursing home residents, including those with dementia, should have, and can have, individualized care in a homelike environment that resembles the lives they lived before entering the facility.

A group of nursing home professional staff, called The Pioneers, envisioned something far beyond the traditional nursing institutions and identified new ways of operating a nursing home. These nursing home administrators proposed innovative strategies to reconstruct the long-term care system and make "deep system change" --- culture change.

* Information from the Pioneer Network website, www.pioneernetwork.org

THE PIONEERS

Culture Change . . .

Culture change is a transformation of the whole nursing home atmosphere — the physical environment, staff routines, authority structure, and resident care — into an atmosphere that is “life-affirming, satisfying, humane and meaningful. Culture change has been shown to transform demoralized, dispirited staff into productive teams and dispirited, isolated elders into active members of engaged communities.” *

Culture change begins with a revolutionized mindset. Facility administrators and staff, along with residents and families, must challenge their assumptions that long-term care cannot be changed. They must work together to achieve truly individualized care.

WHATEVER THE RESIDENTS WANT,
WE GIVE IT TO THEM.

Eric Haider, Pioneer
Crestview Nursing Home, Bethany, MO

Pioneer Principles* . . .

- Respond to spirit, as well as mind and body.
- Put person before task.
- All elders are entitled to self-determination.
- Community is the antidote to institutionalization.
- Do unto others as you would have them do unto you.
- Practice self-examination, searching for new creativity and opportunities for doing better.

YOUR FACILITY

Administrators & Staff . . .

- **Be informed** — Ask your local ombudsman for Pioneer Practice resources, dates of upcoming regional and statewide Pioneer meetings. Hold staff in-services so all levels of staff know how Pioneer Practices benefit staff, as well as residents.
- **Others have done it, so can you!** The Department of Public Health (DPH) wants quality care for residents. Work closely with DPH to implement Pioneer Practices by finding solutions to the potential barriers of specific practices.
- **Begin by examining life in the facility** — Ask yourself and all staff, “Would you have this in your home?”
- **Consult your residents and families** — Work closely with the family and resident councils.
- **Implement one practice at a time** — Culture change is a process. It takes time.

Pioneer Challenges . . .

- **Improve dining services** — Residents should be able to dine whenever they are hungry. The facility kitchen can operate like a restaurant — meals made to order. The facility could also implement 24-hour food service.
- **Increase residents’ physical activity** — 7 days a week
- **Start a family council** — A family council is independent (self-led and self-determined). Staff attend upon invitation only.

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ELEMENTS OF PIONEER PRACTICES

- **Residents get what they want** — Staff follow each resident's schedule and preferences related to dining, bathing, sleeping, activities, etc.
- Residents and staff are grouped into **small communities** within the larger facility.
- **Permanent staff assignments** — Staff know residents well and are part of the facility community.
- **Direct care staff** are an integral part of the facility's decision-making team.
- **Homelike environment** — Animals, plants, gardens, homelike decor, kitchenettes, no central nurses' stations.
- **Intergenerational programs** — Families and children bring life to a facility and allow residents a chance to **give** care.
- **Family and Resident Councils** — Facility staff listen and respond to the concerns of the councils. Councils are independent and staff only attend meetings when invited.
- **Activities** — Opportunities for spontaneous and scheduled activities all day, every day. Animals, plants and children create an environment for spontaneous activity and relationship building.

I WANT THE FIRST STEP
OF THIS MOVEMENT TO BE ABOUT
STOPPING THOSE THINGS THAT ARE
AN INSULT TO THE HUMAN SPIRIT.

Barry Barkan, Pioneer

Illinois Department on Aging's

Long Term Care Ombudsman Program

**supports the Pioneer Practices and
quality of life for residents.**

The name and number of your local
Long Term Care Ombudsman is available
at www.state.il.us/aging/; or call the toll-free

**Senior HelpLine:
1-800-252-8966**

(Voice & TTY)

or call:



Long Term Care Ombudsman services available under the
Older Americans Act are provided at no charge; however
contributions are gratefully accepted and will help to make
services available to more seniors.



421 East Capitol Ave., #100
Springfield, Illinois 62701-1789
FAX: 217-785-4477
www.state.il.us/aging

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